The "chiropodists'" bill (A. B. 313) was satisfactorily amended and went on to passage.

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Thanks of the Association to All Who Rendered Service.—Too much praise cannot be given to the chairman of the California Medical Association Committee on Public Policy and Legislation, Dr. Junius B. Harris of Sacramento, and his aides, who jointly bore the brunt of the hard legislative conflicts which have taken place almost daily since January 2, 1933, when the present fiftieth legislature of California held its first meeting. To the officers and to a host of other workers in the component county societies go the thanks of the Association for the efficient services which they likewise rendered.

Readers of California and Western Medicine are urged to scan the committee's report on page 474. Also the letter of Mr. Ben Read on page 473.

SOME COMPARATIVELY NEW DISEASES— IMPORTANCE OF THEIR STUDY

Some Important Diseases Which Are Making Their Start in California.—Because in the Pacific Slope commonwealths may be found a number of diseases not encountered in certain other sections of the United States, comment thereon may not be out of place. Several of these diseases have recently received special mention in California and Western Medicine.

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In the April California and Western Medicine, page 275, Reed and Meyer of the George Williams Hooper Foundation of the University of California made brief editorial comment on tropical and oriental diseases which American physicians of the tomorrow in all probability will be called upon to prevent and treat. Their remarks may well be taken to heart.

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Also in the April number, page 245, was printed a preliminary communication by Kofoid and Donat of the Zoölogical Laboratory of the University of California, in which attention was called to the possibilities of trypanosome infection in persons bitten by "kissing bugs," and offering the coöperation of the state university in the study of such cases.

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An equally interesting paper was that on onchocercosis by Johnstone and Larsen of the Pacific Institute of Tropical Medicine of the University of California. This paper was printed in the May California and Western Medicine, page 361. The authors gave important information concerning the clinical manifestations of this little-known disease. The paper is worthy of perusal, and should be of particular interest to specialists in diseases of the eye.

In this June number of California and Western Medicine is printed a letter from

former Surgeon-General Rupert Blue, who had a prominent part in the federal effort to control the San Francisco bubonic plague outbreak in the period 1900-1910; and who was again ordered to California when bubonic plague showed itself in Los Angeles in the year 1924. Surgeon-General Blue's letter is printed on page 473.

While on the subject of bubonic plague, attention may be called to the fact that during Doctor Blue's sojourn at Los Angeles a strenuous effort was made to secure the passage of rat-proofing building ordinances in the county and city.* San Francisco has such ordinances. A special committee of the Los Angeles County Medical Association cooperated, but was unable to secure the passage of an ordinance which was drafted by Surgeon-General Blue and the writer. That effort did not go amiss, however, for this year a copy of the then proposed ordinance was given to Los Angeles County Health Officer Pomeroy, who induced the Board of Supervisors to pass it; its application applying to all buildings except residences. The residence exemption was made at this time because of the present general economic conditions. The Los Angeles City Health Department is also making an effort to secure the passage of a similar ordinance. It is hoped this effort will be successful. Such an ordinance is certainly much needed, and if not passed, the day may come when, through loss of much money and life, the city of Los Angeles will rue its disregard of this public health need. For as long as the Bacillus pestis is not eliminated in ground squirrels, rats and other rodents of California, bubonic plague must continue to play the rôle of a possible public health menace to our state and nation.

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Another article of importance which is printed in this issue of California and Western Medicine is that by Brigadier General Munson of the United States Army Medical Corps, on the subject of "Reforestation Camps and Medical Opportunity." This paper will be found on page 422.

The picture which Munson draws of the new medical problems which may come into being when more than one hundred thousand civilian citizens are placed in the federal forest reserves located between the Rocky Mountains and the Pacific Ocean should commend itself to the serious consideration of the medical profession of the entire United States. Here again, California has reason for congratulation in its possession of the Hooper Foundation for Medical Research. Dr. Karl Meyer, director of the Hooper Foundation, and Colonel C. J. Manly, chief surgeon of the Ninth Corps Area of the United States Army, are exerting all possible effort to safeguard public health interests, and will have the active support of the entire medical profession.

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Psittacosis, or parrot fever, is still another disease which only a short time ago was practically unknown to American physicians. It is of special

^{*} See California and Western Medicine, November 1927, pages 666, 683, and 684.

interest to Californians, because the breeding of birds of the parrot family is a well developed business in Southern California. The quarantine restrictions laid down by the public health departments of the Federal Government and some of the states have been extremely irksome to many of the California bird dealers. The California State Board of Health has given much thought to a proper solution of the problem. But just at a time when it was hoped the restrictions could be lessened comes another Associated Press dispatch of May 17 from Baltimore containing this paragraph:

"The suggestion to 'kill all parrots' was made in a lecture at the School of Hygiene and Public Health of the Johns Hopkins University by Doctor Rivers, who is a member of the Rockefeller Institute for Medical Research."

From which it may be inferred that psittacosis is another disease concerning which the complete story is yet to be told.

To the above list of diseases which have their natural habitat in the Tropics and Orient, others might be added. Those named indicate how important it is to carry on further study of these diseases, which are comparatively new to the American medical profession.

STATE MEDICAL LIBRARY OF CALIFORNIA

Progress Report.—One of the statutes enacted by the Forty-ninth California Legislature of two years ago was a bill which brought into existence a state medical library (A. B. 477, Chapter 699, approved by Governor Rolph on June 9, 1931). Such a library was first proposed in these columns about four years ago. One of the arguments emphasized at that time was the statement that there was danger that the reserve funds of the California State Board of Medical Examiners might be spent for other purposes than the maintenance of public health and medical standards. Because the board's funds were not derived from general taxation sources but from extra-tax license and other fees received from physicians, it was felt that a portion of the reserve funds could be properly spent for a state medical library. The effort to bring this about culminated successfully. In view of the fact that the present legislature recently passed a law transferring some \$28,000 of the examining board's reserve funds to help purchase an office building in San Francisco, it becomes evident how well founded was the contention that there was danger of diversion of a portion of the board's funds to other than public health and medical purposes.

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The Two Branches of the State Medical Library.—The State Medical Library of California has two branches—one in San Francisco, and the other in Los Angeles. Dr. Chauncey D. Leake of the University of California Medical School, who generously gives his services to the state library without salary, has been asked to submit a report on the work thus far accomplished. This report is printed in this issue, page 421.

Its perusal is commended to members of the California Medical Association, to whom it must be gratifying to know that the work has been started in efficient although modest fashion. The State Medical Library is working in closest harmony with the other medical libraries of California; but because of its limited budget the library aims for the present, particularly to be of service to those physicians practicing in rural and smaller urban communities who are not easily served through previously existing medical library facilities. From time to time other reports of this comparatively young institution will be printed. All physicians who are interested or who wish to participate in the facilities of the State Medical Library are cordially invited to write to the librarians of either the San Francisco or Los Angeles branches. The State Medical Library aims to be of real service to all physicians who seek its aid.

EDITORIAL COMMENT*

THE ACTION OF PHYSOSTIGMIN (ESERIN)

As a practical matter of therapuetics, critical clinicians have long felt that physostigmin does not directly stimulate the tissues innervated by the craniosacral autonomics in the manner of pilocarpin, but rather that it sensitizes these tissues to other stimuli or influences. For example, physostigmin does not cause, in the ordinary dosage of one milligram, severe intestinal contractions or peristalsis, but rather does it seem to make the intestinal tract more satisfactorily responsive to local stimuli normally present, such as fecal material or gas. Thus quite rationally, clinicians of the Philadelphia school frequently afford excellent symptomatic relief in "vagotonia," especially associated with heartburn and other gastro-enteric disorder, by combining physostigmin with tincture of belladonna in the same prescription. At first sight this might be thought to be a foolish combination in which the physiologic antagonists would counteract each other's effect. However, because of the foreign material in the tincture of belladonna, the atropin in it is more slowly absorbed than if it were given as the pure alkaloid and thus it has a more prolonged effect. The atropin alone, moreover, would leave the gut in an unsatisfactory atonic condition. Consequently the addition of physostigmin is quite rational in the light of the explanation offered, namely, that it sensitizes the gastro-enteric tract to whatever normal stimuli, food in particular, may influence it. Thus digestive functions are not as seriously altered as if atropin were used alone. Nevertheless, physostigmin is scarcely ever considered for the relief of postoperative intestinal stasis or other atonic conditions of the gut.

Experimental evidence supporting this critical clinical opinion regarding the action of physo-

^{*} This department of California and Western Medicine presents editorial comment by contributing members on items of medical progress, science and practice, and on topics from recent nedical books or journals. An invitation is extended to all members of the California and Nevada Medical Associations to submit brief editorial discussions suitable for publication in this department. No presentation should be over five hundred words in length.